

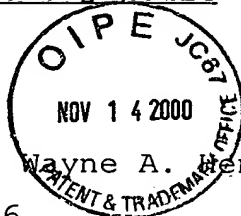
RESPONSE UNDER 37 C.F.R. § 1.116

EXPEDITED PROCEDURE

GROUP ART UNIT 1631

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Dkt. 58323/JPW/PT

AF/1631

#10 B
Dia
11/29/00

In re application of: Wayne A. Hendrickson and Barry Honig

Serial No.: 09/235,986

Examiner: J.S. Lundgren

Filed: January 22, 1999

Group Art Unit: 1631

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NOV 16 2000

For: PROCESS FOR PAN-GENOMIC DETERMINATION
OF MACROMOLECULAR ATOMIC STRUCTURES

ASSISTANT COMMISSIONER FOR PATENTS

November 9, 2000

Box AF

Washington, D.C. 20231

TECH CENTER 1600/2900

S I R:

Transmitted herewith is an amendment to the above-identified application.

☒ Small entity status of this application under 37 C.F.R. § 1.9 and § 1.27 has been established by a verified statement previously submitted.

☐ A verified statement to establish small entity status under 37 C.F.R. § 1.9 and § 1.27 is enclosed.

☒ No additional fee is required, other than the fee for a two-month extension of time.

The filing fee is calculated as follows:

	NUMBER AFTER AMEND- MENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		NUMBER OF EXTRA CLAIMS PRESENTED		RATE		FEE	
							SMALL ENTITY	OTHER ENTITY	SMALL ENTITY	OTHER ENTITY
Total Claims	12	-	* 20	=	*** 0	X	9	18	=	0
Indepen- dent Claims	2	-	** 3	=	*** 0	X	40	80	=	0
Multiple Dependent Claim(s) Presented <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							135	270		0
For First Time:							TOTAL ADDITIONAL FEE			
							\$ 0.00			

* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in the this space.

** If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.

*** If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than "0", write "0" in the space.

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Wayne A. Hendrickson and Barry Honig
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Amendment Transmittal Letter
Page 2

The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest of the "NUMBER AFTER AMENDMENT" in any prior amendment of the number of claims as originally filed.

_____ Please charge Deposit Account No. _____
in the amount of \$_____.

X A check in the amount of \$ 195.00 is enclosed.

X The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 03-3125. Three copies of this sheet are enclosed.

X Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims.

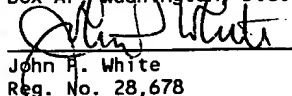
X Any patent application processing fees under 37 C.F.R. § 1.17.

Respectfully submitted,



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I hereby certify that this correspondence is being deposited this date with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Box AF, Washington, D.C. 20231.

 7/19/00
John P. White Date
Reg. No. 28,678